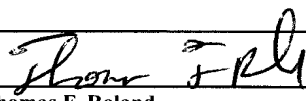
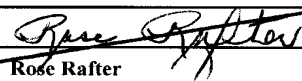


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|--|----------------------|------------------------|-------------|
| <h1>TRANSMITTAL FORM</h1> <p><i>(to be used for all correspondence after initial filing)</i></p> | Application Number   | 10/538,730             |             |
|  | Filing Date          | 06/13/2005             |             |
|  | First Named Inventor | GUERRET, Olivier       |             |
|  | Art Unit             | 1796                   |             |
|  | Examiner Name        | Bernshiteyn, Michael   |             |
| Total Number of Pages in This Submission   | 3                    | Attorney Docket Number | FR-AM1907NP |

| ENCLOSURES <i>(Check all that apply)</i>   |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><b>Request for Continued Examination (RCE) Transmittal</b> |
| Remarks  |  |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |          |        |
|--|---|----------|--------|
| Firm Name                                  | Arkema Inc.   |          |        |
| Signature                                  |  |          |        |
| Printed name                               | Thomas F. Roland  |          |        |
| Date                                       | June 25, 2008   | Reg. No. | 42,110 |

| CERTIFICATE OF TRANSMISSION/MAILING   |   |                |               |
|---|---|----------------|---------------|
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